Approved For Release 2000/04/12 : CIA-RDP64-00360R000400110050-1

Standard Form No. 1034
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

Bu. Vouch. No. 381

U. S. COST REIMBURSABLE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., *Payee's Account No.* 1366

To _____
(Payee)

_____
(Address) (City) (State)

PAID BY

SAPC 8712
COPY 1 OF 3

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE Cost	UNIT PRICE Per	AMOUNT Dollars	AMOUNT Cts.
		Costs				44,736	48

PAYMENT:
Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from to Weight Government B/L No. Total $ 44,736 48

I certify that the above bill is correct and just and that payment has not been received.

STATOTHR [redacted] (Signature original only)

Date 8- STATOTHR [redacted] or bills)

Per [redacted]

(Payee must NOT use this space)

Differences _____

Amount verified; correct for 44,736 48

(Signature or initials) JHK

Contract No. A101 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for pay[redacted] STATOTHR 56

† Approved for $ _____ †[redacted]

By [redacted] SIGN ORIGINAL ONLY T[redacted]
(Approving Officer)

Title [redacted] 8/17/56 Date SEP 19 1956

STATOTHR (Contracting Officer)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for $_____ } { on Treasurer of the United States in favor of payee named above.
Cash, $_____, on _____, 19____. Payee _____ (Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, [illegible]."

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary. A certifying officer will sign on the line below "Approved for $_____", and

Per _____

Title _____

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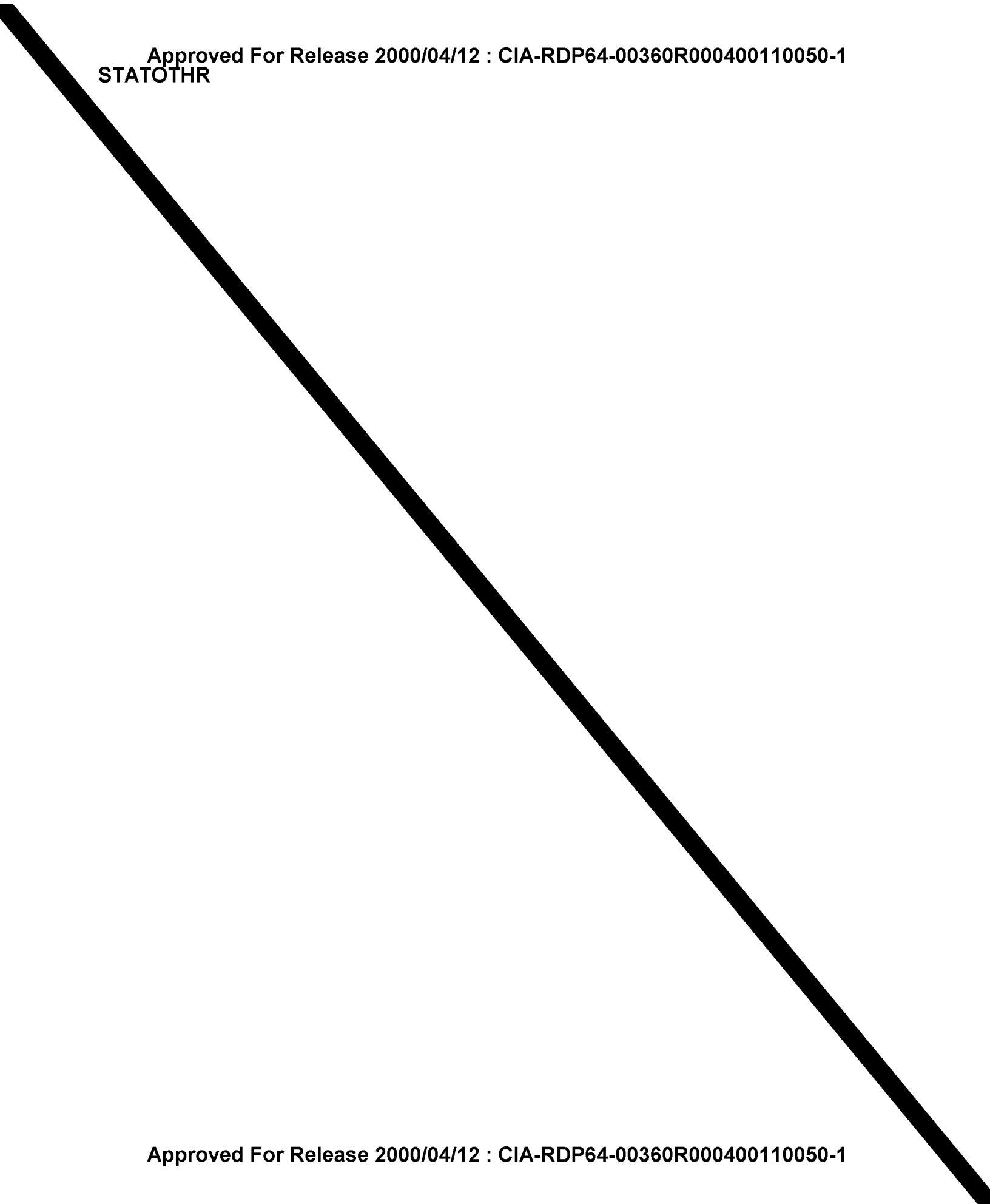
STATOTHR



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RW - 71002 (4-56)

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☐ CHECK REGISTER
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☐ SUMMARY INDIRECT POSTING JOURNAL FOR OPERATING DIVISIONS
☐ SUMMARY INDIRECT POST FOR NON-OPERATING DIVI

ACCOUN

COST CENTER MAJ	INT	SUB	DATE MO	DAY	YR	CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
25	40	00	07	30	6	51117	J MILLEN	528646
25	40	00	07	30	6	51118	R C A	528492
25	40	00	07	31	6	51127	BELL RADIO	528654
25	40	00	07	30	6	51108	FABRI/TRON	528523
25	40	00	07	31	6	51130	FABRI/TRON	528488
25	40	00	07	30	6	51111	GLIDE EAS	527992
25	40	00	07	30	6	51111	GLIDE EAS	527992
25	40	00	07	31	6	51127	BELL RADIO	528629
25	40	00	07	31	6	51131	GLIDE EAS	527992
25	40	00	07	30	6	51100	HELIPOT	517964
25	40	00	07	30	6	51100	HELIPOT	527573
25	40	00	07	30	6	51100	HELIPOT	527573
25	40	00	07	30	6	51115	MAGNECRAFT	527674
25	40	00	07	30	6	51102	AM PHENOL	528431

FORM NO. 1421 THE STANDARD REGISTER CO. - PACIFIC DIVISION OAKLAND LOS ANGELES

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RECEIVING REPORT NUMBER	C.E. CODE	CHARGE DISTRIBUTION ACCOUNT	M.J.O.	S. O.	WORK ORDER	DISTRIBUTION AMOUNT
9132	5	12700	5042			1881
8640	5	12700	5042			3028
8758	5	12700	5042			32595
						37504 -
						37504 *
						37504 * -
9042	5	12700	5042	51		5738
						5738 -
						5738 *
						5738 * -
9041	5	12700	5042	65		4019
						4019 -
						4019 *
						4019 * -
8938	5	12700	5042	67		17611
8937	5	12700	5042	67		1589
8777	5	12700	5042	67		1294
9084	5	12700	5042	67		13470
						33964 -
						33964 *
						33964 * -
18297	5	12700	5042	68		285600
7891	5	12700	5042	68		2250
7496	5	12700	5042	68		4500
9120	5	12700	5042	68		45503
						337855 -
						337855 *
						337855 * -
9040	5	12700	5042	75		1871
						1871 -
						1871 *
						1871 * -
					Total pg. 1	4209 51
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						$ 4217 07

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COST CENTER			DATE			CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER
MAJ	INT	SUB	MO	DAY	YR			
25	40	00	07	31	66	30379	PETTY CASH	U

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	5	12700	3042			7 56 7 56 7 56 7 56 7 56

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